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PTO/SB/22 (10-00)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) ABIOS.042A (5010-350)	
In re Application of Timothy B. STOCKWELL et al.			
Application Number		10/672,937	
For Mitochondrial DNA Autoscore System			
Group Art Unit: 1631		Examiner: Shubo ZHOU	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ <u>120.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ <u>450.00</u>
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ <u>1,020.00</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ <u>1,590.00</u>
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ <u>2,160.00</u>

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

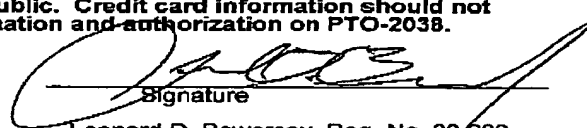
☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any deficiency in fees which may be required, or credit any overpayment, to Deposit Account Number 50-0925.
I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor
☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☒ attorney or agent of record.
☒ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 33,226

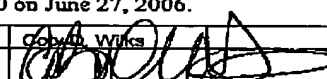
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

June 27, 2006
Date


Signature
Leonard D. Bowersox, Reg. No. 33,226
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

CERTIFICATE OF MAILING OR TRANSMISSION			
I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (571) 273-8300 on June 27, 2006.			
Name (Print/Type)	<u>Colin Wilks</u>	Date	<u>June 27, 2006</u>
Signature			

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Amendments to the Claims are reflected in the listing of claims which begins on page 6 of this paper.

Amendments to the Drawings begin on page 19 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.

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